## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000032427 (4)

FEBERT, INC.

CITY-ST-ZIP

**FILED** 

Feb 20 1998 8:00am

Secretary of State

(10/97

Principal Place of Business Mailing Address 4956-13 LE CHALET BLVD 4956-13 LE CHALET BLVD **SUITE 13** SUITE 13 **BOYNTON BEACH FL 33436 BOYNTON BEACH FL 33436** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/28/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0498108 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 FUCHS, LARRY 590 ROYAL PALM BEACH BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **ROYAL PALM BEACH FL 33411** 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE □ Change \_\_\_ Addition RONZONI, RALPH NAME 1.2 NAME 10559 SPICEWOOD TRAIL STREET ADDRESS 1.3 STREET ADDRESS **BOYNTON BEACH FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Channe Addition 2.1 TITLE **RONZONI, PETER** NAME 2.2 NAME 16215 SHADY PINES COURT STREET ADDRESS 2.3 STREET ADDRESS WELLINGTON FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change ☐ Addition RONZONI, VIRGINIA NAME 3.2 NAME 10559 SPICEWOOD TRAIL STREET ADDRESS 3.3 STREET ADDRESS **BOYNTON BEACH FL** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TIT) F Change Addition NAME **4.2 NAME** STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE ☐ Addition NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY+ST-ZIP DELETE TITLE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP